

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Yutaka WADA et al.

Serial No. 09/916,305

Filed July 30, 2001



Attn: Application Branch

Attorney Docket No. 2001-1079

POLISHING METHOD USING AN ABRADING
PLATE

(Rule 1.53(b) Continuation-In-Part
of Serial No. 09/446,764 & 09/276,153,
Filed April 28, 1999 & March 25, 1999)

PATENT OFFICE FEE TRANSMITTAL FORM

Assistant Commissioner for Patents,
Washington, DC 20231

Sir:

Attached hereto is a check in the amount of \$376.00 to cover Patent Office fees relating to filing the following attached papers:

Additional Claims Fee:

Excess of Twenty	\$216.00
Independent	\$160.00
Multiple Dependent Fee	\$

A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.

THE COMMISSIONER IS AUTHORIZED
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FEES FOR THIS PAPER TO DEPOSIT
ACCOUNT NO. 23-0975

Respectfully submitted,

Yutaka WADA et al.

By

A handwritten signature in black ink, appearing to read "Nils E. Pedersen".

Nils E. Pedersen

Registration No. 33,145

Attorney for Applicants

NEP/krl

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August 27, 2001

[Check No. 46138]
2001_1079



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

: **ATTN: APPLICATION BRANCH**

Yutaka WADA et al.

: Docket No. 2001-1079

Serial No. 09/916,305

: Group Art Unit 3723

Filed July 30, 2001

POLISHING METHOD USING AN
ABRADING PLATE
**(Rule 1.53(b) Continuation-In-Part
of Serial No. 09/446,764 & 09/276,153,
Filed April 28, 1999 & March 25, 1999)**

ADDITIONAL CLAIMS FEE TRANSMITTAL LETTER

Assistant Commissioner for Patents,
Washington, DC 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application. Additional fees required as a result of this Amendment are calculated as follows:

	SMALL ENTITY	LARGE ENTITY	
Total Claims exceeding 20 (not already paid for): 12 x	(\$ 9 = \$)	or	(\$18 = \$216.00)
Indep. Claims exceeding 3 (not already paid for): 2 x	(\$40 = \$)	or	(\$80 = \$160.00)
<input type="checkbox"/> Multiple Dep. Claim(s) (if there previously were none): +	(\$135 = \$)	or	(\$270 = \$)
Total Additional Fee =	<u>\$</u>	<u>or</u>	<u>\$376.00</u>

Small entity status of this application is established by the verified statement under 37 C.F.R. 1.9 and 1.27 which

is enclosed or

has been previously submitted.

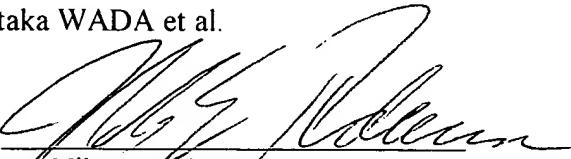
A check in the amount of \$376.00 is enclosed.

[] Please charge Deposit Account No. 23-0975 the amount of \$ to cover additional fee. The Commissioner is authorized to charge any deficiency associated with this communication or to credit any overpayment to the Deposit Account. The original and two copies of this document are enclosed.

Respectfully submitted,

Yutaka WADA et al.

By


Nils E. Pedersen
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August 27, 2001

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